

Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Application Number 10/767737

Filing Date January 29, 2004

First Named Inventor Roney Graf

Art Unit 3763

Examiner Name Unknown

Sheet 1 of 2

Attorney Docket Number 33901/US

U.S. PATENT DOCUMENTS

*Examiner Initials	Cite No.	DOCUMENT NUMBER Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
/P.P./		US- 4,592,745	06-03-1986	Jern, Rex et al.	
		US- 5,026,343	06-25-1991	Holzer, Walter	
		US- 5,226,895	07-13-1993	Harris, Dale C.	
		US- 5,279,585	01-1994	Balkwill, David	
		US- 5,304,152	04-1994	Sams, Bernard	
		US- 5,383,865	01-1995	Michel, Peter	
		US- 5,545,147	08-13-1996	Harris, Dale C.	
		US- 5,630,796	5-20-1997	Bellhouse et al.	
		US- 6,146,361	11-14-2000	Dibiasi et al.	
		US- 6,200,296	3-13-2001	Dibiasi et al.	
		US- 6,221,046	4-24-2001	Andrew Burroughs et al.	
		US- 6,623,446	9-23-2003	Navelier et al.	
		US- 6,585,698	07-01-2003	Packman et al.	
		US- 6,899,698	05-2005	Sams, Bernard	
		US- 2004/0215152 A1	10-28-2004	Kirchhofer et al.	
		US- 2004/0186442 A1	9-23-2004	Graf, Roney	
		US- 2004/0186431 A1	9-23-2004	Graf, Roney	
/P.P./		US- 2004/0215153 A1	10-28-2004	Graf, Roney	

FOREIGN PATENT DOCUMENTS

*Examiner Initial	Cite No.	FOREIGN PATENT DOCUMENT		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	TRANSLATION	
		Country Code:	Number - Kind Code (if known)				YES	NO
/P.P./		EP	0295075 A1	12/14/1988	Hypoguard UK		<input checked="" type="checkbox"/>	<input type="checkbox"/>
/P.P./		EP	1095668 A1	05/02/2001	Becton, Dickinson & Company		<input checked="" type="checkbox"/>	<input type="checkbox"/>

EXAMINER SIGNATURE /Pritesh Patel/

DATE CONSIDERED 07/24/2008

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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /P.P./



Substitute for form 1449/PTO				Application Number		10/767737		
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				First Named Inventor		Roney Graf		
				Art Unit		3763		
				Examiner Name		Unknown		
Sheet	2	of	2	Attorney Docket Number		33901/US		
FOREIGN PATENT DOCUMENTS								
*Examiner Initial	Cite No.	FOREIGN PATENT DOCUMENT		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	TRANSLATION	
		Country Code:	Number - Kind Code (if known)				YES	NO
/P.P./		EP	0498737 A1	08/12/1992	Terumo Kabushiki Kaisha		<input checked="" type="checkbox"/>	<input type="checkbox"/>
/P.P./		EP	0594349 A1	04/27/1994	Eli Lilly & Company		<input checked="" type="checkbox"/>	<input type="checkbox"/>
/P.P./		WO	00/02606	01/20/2000	Novo Nordisk A/S		<input checked="" type="checkbox"/>	<input type="checkbox"/>
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